

## **Application Data Sheet**

### **Application Information**

Application Number::

Filing Date::

Application Type::

**US National Phase**

Subject Matter::

**Utility**

Suggested Classification::

Suggested Group Art Unit::

Title::

**PHASE-SHIFTING CELL FOR AN ANTENNA  
REFLECTARRAY**

Attorney Docket Number::

**62827 (4590-360)**

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

**13**

Total Drawing Sheets::

**8**

### **Applicant Information**

Applicant Authority Type::

**Inventor**

Primary Citizenship Country::

**French**

Status::

Given Name::

**Michel**

Middle Name::

Family Name::

**CHARRIER**

Name Suffix::

City of Residence::

**Saclay**

State or Province of Residence::

Country of Residence::

**France**

Street of Mailing Address::

**26 rue Renan**

City of Mailing Address::

**Saclay**

Postal or Zip Code::

**31400**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	<b>French</b>
Status::	
Given Name::	<b>Thierry</b>
Middle Name::	
Family Name::	<b>DEAN</b>
Name Suffix::	
City of Residence::	<b>Gif Sur Yvette</b>
State or Province of Residence::	
Country of Residence::	<b>France</b>
Street of Mailing Address::	<b>28 allée de la Mare Gabrielle</b>
City of Mailing Address::	<b>Gif Sur Yvette</b>
Postal or Zip Code::	<b>91190</b>

### **Applicant Information**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	<b>French</b>
Status::	
Given Name::	<b>Afshin</b>
Middle Name::	
Family Name::	<b>ZIAEI</b>
Name Suffix::	
City of Residence::	<b>Vanves</b>
State or Province of Residence::	
Country of Residence::	<b>France</b>
Street of Mailing Address::	<b>108 rue Sadi Carnot</b>
City of Mailing Address::	<b>Vanves</b>
Postal or Zip Code::	<b>92170</b>

### **Applicant Information**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	<b>French</b>
Status::	
Given Name::	<b>Hervé</b>
Middle Name::	
Family Name::	<b>LEGAY</b>
Name Suffix::	
City of Residence::	<b>Plaisance Du Touch</b>
State or Province of Residence::	
Country of Residence::	<b>France</b>
Street of Mailing Address::	<b>28 avenue de la Casse</b>
City of Mailing Address::	<b>Plaisance Du Touch</b>
Postal or Zip Code::	<b>31830</b>

### **Applicant Information**

Applicant Authority Type::	<b>Inventor</b>
Primary Citizenship Country::	<b>French</b>
Status::	
Given Name::	<b>Béatrice</b>
Middle Name::	
Family Name::	<b>PINTE</b>
Name Suffix::	
City of Residence::	<b>Lanta</b>
State or Province of Residence::	
Country of Residence::	<b>France</b>
Street of Mailing Address::	<b>En Bannes Saint Anatoly</b>
City of Mailing Address::	<b>Lanta</b>
Postal or Zip Code::	<b>31570</b>

## Correspondence Information

Correspondence Customer No:: **33308**  
Phone Number:: **(703) 684-1111**  
Fax Number:: **(703) 518-5499**  
E-Mail Address::

## Representative Information

Representative Customer Number::  
**Representative Designation:: Registration Number:: Representative Name::**  
*Primary or Associate*

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
<b>FR</b>	<b>02/07743</b>	<b>June 21, 2002</b>	<b>Yes</b>

## Assignee Information

Assignee Name:: **THALES**  
Street of Mailing Address:: **45 rue de Villiers**  
City of Mailing Address:: **Neuilly Sur Seine**  
State of Mailing Address::  
Country of Mailing Address:: **France**  
Postal or Zip Code:: **92200**